

***HELPFUL HINTS
GUIDE TO
UNDERSTANDING and
MANAGING YOUR
GRANT***

JULY 2000

The Office of Grants Management (OGM), Bureau of Primary Health Care (BPHC) originally prepared this helpful hints guide in August 1996. This updated guide is intended only for the use of grantee organizations receiving a Notice of Grant Award (NGA) from the Office of Grants Management, Bureau of Primary Health Care, Health Resources and Services Administration. This office issues all grant awards for the BPHC as well as those of the Office of Rural Health Policy (ORHP) and the Office for the Advancement of Telehealth (OAT). It also issues a few awards on behalf of the Office of the Administrator, Health Resources and Services Administration.

The best way to verify if this guide is applicable to your award is to check item 8 on the Notice of Grant Award (NGA). If the grantor is the BPHC, ORHP, or OAT, the answer is yes. Another way is to check the Grants Management Officer signature line. If the name & title are followed by BPHC, then again the answer is clearly yes. The third and final way is to look in the contact section. If the grants management specialist is contacted at the BPHC, then it is a BPHC award and this guide can be used.

This guide is NOT intended to substitute or supersede any formal grant regulation or requirement. It is also NOT intended to be a substitute for a grantee organization being fully aware and knowledgeable about all formal grant requirements and should in NO way be considered all inclusive.

Questions regarding grants management issues should be addressed to the grants management specialist identified in the grantee's most recent Notice of Grant Award.

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INFORMATION EVERY GRANTEE NEEDS TO HAVE MANAGE GRANT FUNDS

There are numerous documents a grantee **must have** in order to comply with the terms, which impact their grant. These documents can be obtained on the Internet via links at the BPHC Office of Grants Management site (www.bphc.hrsa.gov/grants). We recommend these documents be maintained in the business office, since it is incumbent upon that office to be sure that all charges are correct and all policies have been followed before allowing an expenditure to be charged to a grant. However, we encourage providing copies to all staff who have responsibility for carrying out the goals and objectives of the grant project (e.g. project director). If there are conflicts between these documents, the order of precedence to follow for their resolution is set forth in the Public Health Service Grants Policy Statement.

The grant program legislation referenced on the NGA (item authorization). This always takes precedence over any regulations, policy or guidance. The reference cited on the NGA is the law under which Congress authorizes the particular grant funding. The law frequently contains very specific requirements regarding activities and expenditure of funds, as well as discretion to the awarding agency to impose additional requirements,

Code of Federal Regulations (CFR) Title 45, Parts 74 and 92 contain uniform administrative requirements for awards and subcontracts to recipients,

Applicable Cost Principles (A-21, A-122, A-87 or appendix E of CFR 45 Part 74). These Office of Management and Budget Circulars are implemented via CFR Parts 74 and 92 and provide guidance on allowable expenditures of Federal funds on grants,

Applicable audit requirements (the Single Audit Act law and its implementation by the Public Health Service through A-133, or the yellow book for hospitals).

CFR Title 42 sets forth programmatic grant requirements for the various grant programs e.g. community and migrant health centers, homeless, public housing, and technical assistance grants.

The NGA itself. This document can impose any additional requirements an awarding agency feels are necessary to protect the Federal interest for a single NGA or a group of NGAs. BPHC categorizes these items as special conditions, special remarks, standard remarks, and reporting requirements.

The Public Health Service Grants Policy Statement dated 4/1/94 with addendum. This document provides additional clarification on items addressed in CFR 42 and 45 Parts 74 and 92 and the cost principles. Although a good guidance, remember this document has NOT been updated since implementation of the revised 45 CFR Part 74 and other policy documents. A copy is provided to each NEW grantee organization with their first NGA.

The Who, What, Why, When, and Wherefores of a BPHC Notice of Grant Award

The Notice of Grant Award (often referred to as the NGA) **is the Official** document which notifies an organization that financial assistance funds are being provided to support the specific **scope of project** of a grant application (use of **Agrant@** includes cooperative agreement which is a type of grant which allows significant Federal involvement). The NGA references ALL provisions binding on the grantee i.e. terms, special conditions, special and standard remarks, and reporting requirements. The original signed NGA should be retained in the official records of the grantee organization, however, copies should be provided to other appropriate individuals who need to be aware of the information provided e.g. the business office that is responsible for the audit and Financial Status Report (FSR), a project director who is responsible for the day to day activities of the project, or a contractor who may be responsible for carrying out substantive programmatic activities, etc.

NOTE: Management Assessment Items (MAIs) are not part of the NGA. They are advisory programmatic issues that should be addressed during the budget period of funding. Responsibility for follow-up is the sole responsibility of the program official identified on the NGA.

1. Q - Who is the Grants Management Officer, Grants Management Specialist, Program/Project Officer, and Field Office Grants Liaison?

A - The **Grants Management Officer** is the authorized granting official of the awarding agency (identified at the bottom of every NGA) who is responsible for the business management/policy aspects of particular grants. Business management/policy aspects include: (1) review of applications, (2) negotiation of budgets, (3) issuance of NGAs, (4) interpretation of policy, regulations, etc., (5) receipt of postaward communications, (6) receipt and approval of requests requiring prior approval, and (7) receipt, review and acceptance of FSRs.

The **Grants Management Specialist** is the BPHC staff person designated by the Grants Management Officer to facilitate the responsibilities of the Office of Grants Management. This person is identified in the **Acontact@** section of the NGA.

The **Field Office Program/Project Officer** (BPHC programs only) is an employee of Health Resources and Services Administration, Office of Field Operations (OFO) and is responsible for the technical, scientific, or programmatic aspects of a grant project. They provide recommendations on the level of support to be awarded and all prior approval requests, review and make recommendations on applications, review progress reports, provide technical assistance to grantees on programmatic direction, handle Management Assessment Items, etc. Such individuals handle most programmatic issues of the grantee organization to assure programmatic progress. This person is identified in the **Acontact@**section of the NGA.

The **Central Office Program/Project Officer** is an employee of the grantor agency who coordinates all final actions on behalf of grantees and makes final recommendations to the Office of Grants Management. When appropriate, they work closely with field office program staff on all programmatic issues. For most BPHC programs, this person is not usually identified on the NGA as they predominantly work with the field office program contact. For Office of Rural Health and Office for the Advancement of Telehealth programs and some BPHC programs, this person will be identified in the **Acontact@**section of the NGA.

The **Field Office Grants Liaison** (BPHC programs only) is an employee of HRSA, OFO. They facilitate coordination of grant related activities between central office staff and field office staff. In some cases, they may have specific project officer assignments. This person is identified in the **Acontact@**section of the NGA.

2. **Q** - When should I expect my NGA?

A - BPHC policy is to have the NGA mailed at least 15 days prior to the budget period start date of the approved grant.

3. **Q** - What are terms?

A - Terms are requirements imposed on the NGA. They are imposed on a grant recipient through statute, regulations, Public Health Service Grants Policy Statement, and special conditions, special and standard remarks, and reporting requirements reflected on the NGA itself, etc.

4. **Q - What are the types of terms?**

A -

(1) Standard terms appear on the face page of every NGA e.g. budget and project period dates, the legislative reference, grantee name and address, principal investigator/program director name, recommended future support (often referred to as base or target funding level), the program income option, projected program income, and the document number.

(2) Special terms

i **Special conditions** - appear on a particular NGA or group of NGAs. They will almost always require a response by a specific date and failure to comply may result in punitive action as indicated. Special conditions are on the NGA because they are deemed necessary to accomplish the objectives of the project, facilitate postaward administration, conserve grant funds, or otherwise protect the interests of the Federal government.

ii **Special Remarks** - appear on a specific NGA or group of NGAs. They are generally of an informational nature; therefore, they are not as serious as a condition. They generally will not require a response but in those instances when they do, failure to respond will not usually result in punitive action. However, failure to comply with a restriction of any kind can result in disallowance of the expenditure.

iii **Standard remarks** - Appear on most if not all NGAs issued. They are of an informational nature and do not usually require a response.

iv **Reporting Requirements** - Standard on all NGAs. Addresses the financial reporting requirementsBFSR and audit. Failure to comply with these requirements will delay future funding requests or other postaward actions, or can result in a drawdown restriction being placed on the Payment Management System account or actual denial of funding.

5. **Q - When are the terms effective?**

A - In accordance with the Public Health Service Grants Policy Statement, Chapter 5, an organization indicates their acceptance of all NGA terms by drawing or otherwise obtaining funds from the Payment Management System.

6. **Q** - Are the terms of the NGA appealable?

A - No. NGA terms are **preaward** determinations, therefore, they are not appealable (see the Public Health Service Grants Policy Statement, page 5). Appeal refers to the processes set forth in 42 CFR Part 50, subpart D (Public Health Service) and 45 CFR Part 16 (Department of Health and Human Services).

This should not be construed to mean that a grant recipient cannot request reconsideration of special terms in accordance with CFR 45 Part 74.14(b)(5) or 92.12(c)(4), as appropriate. Reconsideration of special terms can be requested by contacting the grants management or program representative indicated on the NGA. **However, written prior approval of the request must be received from the BPHC Grants Management Officer prior to drawing/obtaining funds from the Payment Management System.**

7. **Q** - What is Prior Approval?

A - The written permission provided by the authorized granting official before the recipient may undertake certain activities, expend funds, or exceed a certain dollar level.

8. **Q** - Who is the authorized "prior approval" granting official?

A - The Grants Management Officer is the individual designated by the Department of Health and Human Services to serve as the awarding agency official responsible for providing this written permission.

9. **Q** - How do I get a special condition removed?

A - Submit a response (letter) as requested to the grants management representative indicated in the "contact" section of the NGA. Sending it to any other point could delay a response. Grantees are encouraged to discuss issues with the program and/or grants officials identified in the **Acontact@**section of the award document before finalizing requests.

10. **Q** - How soon should I receive a response to my request?

A - It is BPHC's policy to respond to requests within 30 days of receipt of the request. The Office of Grants Management will be responsible for providing this notification to the grantee. It is important to follow-up with the Office of Grants Management "contact" indicated on the NGA regarding the status of the response.

11. **Q** - How do I know a special condition has been removed?

A - Once the request is approved, you will receive either a revised NGA or letter. The response will specifically state that the special condition has been satisfied and/or removed. The response (NGA or letter) **must be signed by/for the BPHC Grants Management Officer** to be official. This response should be maintained in your official records as proof of compliance with the requirement. **A verbal approval is never official.**

12. **Q** - What is all that other **stuff** on the NGA and what does it mean?

A -

Block 1. Date Issued - this is the date the NGA is issued by the Office of Grants Management,

Block 2. CFDA No. - the identifier by which you can find a program in the Catalogue of Federal Domestic Assistance (CFDA). The CFDA is a document printed by the U. S. Government Printing Office and contains a brief description of all Federal grant programs including agency contacts, legislative authority, purpose, etc. and is available on-line,

Block 3. Supersedes Award Notice - this is the date of issuance of any previous NGA for the current **budget** period,

Block 4. Grant No. - (e.g. 1 H27CS01462-01, 5 H19CS01465-02, D04RH00113-02, 2 H66CS01800-05, 6 U31CS00500-05S1 R1). This 13-digit BPHC identifier assigned by HRSA to a specific grant project is of major importance and can provide a wealth of information to someone trying to assist you or respond to a request. This number should be used on all communications or requests related to the grant,

The first digit identifies it as 1/new, 2/project period renewal/competing continuation, 5/budget period renewal/noncompeting continuation, and 6/revision,

The next three digits identify the type of program--H27 Community Health Center, D04 Rural Health Outreach, H19 Community/Migrant Health Center, H66 Health Care for the Homeless, U31 a Cooperative Agreement (see attached list for other options),

The next two digits identify the Federal organizational unit (e.g. CS is BPHC, RH is Office of Rural Health Policy),

The next five digits are the unique identifier assigned to your grant. This number will usually remain the same for the life of the grant project,

The next two digits indicate the number of budget periods, for which the project has been funded,

Block 5. Former Grant No. - when the new grants data system was implemented by HRSA in FY 98 (October 97) new grant numbers were assigned. The previous grant number is reflected in this box. This will continue to be the case until a number is changed for some other reason e.g. change of grantee organization, change from a grant to a cooperative agreement, etc.,

Block 6. Project Period Dates - this block shows the beginning date of the first project period awarded and the ending date of the latest project period recommended for a grant project. A project period is the time for which the grant has been programmatically approved and usually encompasses 3 to 5 budget periods of 12 months each. The end date in this item is extended each time a new project period is approved,

Block 7. Budget Period - **this is the time period during which the Federal funds reflected on the NGA can be expended/obligated.** This period is usually 12 months. However, there are circumstances when it may be more or less than 12 months e.g. administrative extension at the end of the project period, delay in funding a current application and the awarding agency does not want a lapse in funding, alignment of start dates,

Authorization (Legislation/Regulation) - Cites the legislative reference which allows funding of the grant. Grantees are required to know and comply with all requirements of the law,

Block 8. Grantor - identifies the Federal funding agency,

Block 9. Title of Project or Program - this item will provide an easily recognizable key to the grant program supporting your project. It is taken from the legislative title or the title used in the Catalog of Federal Domestic Assistance,

Block 10. Grantee Name and Address - this information is taken from the grant application face page (5161-1/424/item 5). It is incumbent upon the applicant to be sure the **legally** correct information is used on the 424 document,

Block 11. Director of Project (Program/Project Director/Principal Investigator) - this is the person identified in item 5 of the 424 application face page. The Public Health Service Grants Policy Statement requires that **this person be accountable and responsible to the grantee organization,**

Block 12. Award Computation - this code indicates whether the NGA reflects Federal support only (I) or Federal and non-Federal support (II). If II is marked, all funds included in the budget are subject to the applicable cost principles (**this excludes the Health Centers program as an exception has been authorized for this program**),

a. Total Approved Budget - Federal and, if applicable, non-federal share of funds to be expended during the **budget period** for the **scope of the project**:

i. Less Non-Federal Share - if applicable, the amount of non-Federal funds included in the total approved budget which may consist of State or local government funds, private funds, program income including third party reimbursements, or in-kind contributions,

ii. Federal Share - the amount of Federal funds authorized to be expended. This line can consist of "new" Federal dollars (from current FY appropriation) and "old" dollars (from a prior FY appropriation),

(Estimated Program Income) - For health center programs this is the amount of non-federal funding expected to result from **patient services fees**,

b. Unobligated Balance From the Prior Budget Periods

(Additional Authority) - the unobligated funds are added to the authorized Federal share for expenditure in the current budget period. Usually the result of a postaward carryover request,

(Offset) - the unobligated funds are deducted from the Federal share to determine the outlay of current fiscal year funds. This does not affect the actual Federal share authorized for expenditure. Usually occurs at the time of initial funding or a subsequent supplemental funding,

c. Less Cumulative Prior Award(s) This Budget Period - total prior Federal funding this budget period,

d. Amount of Financial Assistance This Action - reflects the amount of current fiscal year funding on the award. A carryover will reflect zero as this is not new fiscal year funding. It is possible for this amount to be a Δ minus amount if an action requires a reduction in the Federal share authorized,

Block 13. Recommended Future Support (referred to in BPHC programs as target funding level) - this reflects the level at which it is intended to continue supporting a project for the remainder of the project period indicated in Block 6 (for Health Center Programs when there is no additional period of support this amount will be included in the remarks section on the application face page),

Block 14. Approved Direct Assistance Budget - this is not applicable to our programs,

Block 15. Program Income Subject to 45 CFR Parts 74 or 92 - A designation is made at the inception of a program. This designation usually is not changed for the duration of support. It is our intent to give as much flexibility to the grantee as possible to utilize program income for the approved project in accordance with the broad objectives of the applicable law and regulations. Failure to comply with the requirements of the designated option can result in disallowance of a cost. The following is a brief explanation of each of the options allowed per Parts 74.24 and 92.25:

- (a) Additional - deducted from the total project or program allowable costs in determining the net allowable costs on which the Federal share of costs is based (we consider this to allow the most flexibility for using program income during and after a project ends and is the one most designated for all programs except for those grants whose law specifies the use of program income),
- (b) Deduction - added to funds committed to the grant by the Federal agency and the grantee and used for the purposes and under the conditions of the grant,
- (c) Finance Non-Federal Share (none given)
- (d) Cost sharing or matching - used to meet the cost sharing or matching **requirement** of a grant,
- (e) Other - a special remark will be included setting forth how program income is to be used. This remark may reflect a combination of the above options or be a totally unique option for a particular grant program,

PHS Grants Management Officer (Signature) - includes the name, title, Bureau identification, and signature of the person authorized to obligate Federal funds, revise an NGA, remove special conditions, and authorize prior approval, etc.,

Block 17. Obj.Class - internal accounting code which identifies the program for which the NGA is awarded as a grant or cooperative agreement,

Block 18. CRS-EIN - stands for Central Registry System, Employee Identification Number. The CRS is maintained by the Department of Health and Human Services and is a registry of all organizations with which they do business. The EIN is a 12-digit number. The first digit identifies the type of grantee (1 -organization, 2-individual); the next 9 digits are the tax-exempt number given to an organization by the Internal Revenue Service or an individual's social security number; the last 2 digits are a letter and number assigned by the CRS at the request of a grantee organization to identify specific components of its organization (A1 is the first assigned). A grantee organization may have one suffix or several suffixes. However, **in those instances where an organization has more than one, it is incumbent upon them to provide the appropriate one to us via the application checklist, Part C,**

Block 19. List No. - No longer used,

Unnumbered -

FY-CAN - This is an obligation number(s),

Document No. - a number used to identify a grantee's accounts/records in the Payment Management System and the account under which funds should be reported as having been spent to the Payment Management System. This number is based on EITHER (1) the former grant number (item 5) in those instances where a new project period of more than one year has not been awarded on or after October 1, 1998, OR (2) in those instances where a new project period has been awarded on the new grant number (item 4). In the future this number will be changed (A to B to C, etc.) with the funding of each new project period of more than one year. It is important to recognize these changes and report expenditures under the proper document number to the Payment Management System on the SF272 forms,

UDS Number (previously referred to as BCRR) - An identifier assigned to health center grantee organizations and is used by them to report user/encounter information, etc.,

Amt. Action Fin. Asst. - this figure reflects the dollar amount of funds for this specific NGA. It can be a plus (**awarding more dollars**) or a minus (**taking away dollars**), or a zero (**not affecting dollar level**). This amount is the same as 12d,

Amt Action Dir. Asst. - this will always be blank,

ADDITIONAL PAGES

These pages will contain other information, special conditions, special and standard remarks, reporting requirements and contacts relevant to this NGA only.

AUDITS

The Single Audit Act as amended requires that all non-profit, non-Federal organizations expending \$300,000 or more in Federal awards in a fiscal year submit an annual audit in accordance with the provisions of OMB Circular A-133.

The costs for audits conducted for organizations expending less than \$300,000 in Federal awards in a fiscal year, or not performed in accordance with OMB Circular A-133, cannot be charged to a Federal award.

OMB Circular A-133 audits, when required, are due within 30 days of receipt from the auditor or within 9 months after the end of a fiscal year. Audits are required to be performed annually.

Audits are submitted in a reporting package to the Federal Clearinghouse. The audit package consists of:

1. Audited financial statements and schedule of expenditures of Federal Awards.
2. Summary Schedule of prior audit findings.
3. Auditor's reports which include:

An opinion or disclaimer of opinion as to whether the financial statements are presented fairly and in conformity with generally accepted accounting standards.

A report on internal controls related to the financial statements and major programs.

A report on compliance with laws, regulations, and provisions of contracts or grant agreements, noncompliance with which could have a material effect on the financial statements.

4. Corrective action plans required as a result of audit findings.

One additional reporting package must be submitted for each agency for which there is an audit finding. The address for the Federal clearinghouse to which the audit packages must be sent is:

Federal Audit Clearinghouse
Bureau of the Census
1201 E. 10th Street
Jeffersonville, IN 47132

A requirement to submit two copies of any audit performed under A-133 is established as a standard reporting requirement on all awards made to private not-for-profit organizations by the Office of Grants Management, Bureau of Primary Health Care. This address is also listed on the Notice of Grant Award.

A program specific audit guide, issued in the Compliance Supplement, should be available by the summer of 2001.

Federal documents, including OMB Circular A-133 and the Compliance supplement establishing these requirements are available on the Internet. The following web addresses are provided:

GRANTSNET <http://www.hhs.gov/grantsnet>
PHS Grants Policy Statement <http://www.nih.gov/grants/policy/gps/>
Code of Federal Regulations <http://www.access.gpo.gov/nara/cfr/cfr-table-search.html>
OMB Circulars <http://www.doleta.gov/regs/omb>
Federal Register http://www.access.gpo.gov/su_docs/aces/aces140.html
Catalog of Federal Domestic Assistance <http://www.cfda.gov/>
FEDWORLD Information Network <http://www.fedworld.gov/>

CLOSEOUT PROCEDURES

Definition: The process by which the awarding office determines whether all applicable administrative actions and all work required by the grant have been completed by the recipient and the awarding agency for a project or other specified period.

Closeout will be accomplished as soon as possible after expiration of a grant,

- A letter requesting certain information in accordance with 45 CFR Parts 74 or 92 will be sent to the grantee,
- The required information is due within 90 days of expiration,
- The required information will include (1) a final FSR which may not include any unliquidated obligations, (2) a list of equipment with a current fair market value of \$5,000 or more, (3) a list of unused supplies with a current fair market value of \$5,000 or more, and (4) a final programmatic progress report (unless being handled by program staff)
- The grantee must submit appropriate reports to the Payment Management System (PMS) to closeout their accounts. The amount reported to PMS in total must be the same as the amount reported to the awarding agency on ALL FSRs for the same document number account in order for this account to be closed. It is the responsibility of the grantee to (1) reconcile reports submitted to PMS and the awarding agency, (2) liquidate all obligations within 90 days, (3) refund any balances of unobligated cash. All unobligated balances will be withdrawn,
- Closeout does not affect the requirements for equipment accountability or record retention nor does it affect the Federal Government's right to conduct an audit and recover amounts based on the result of the audit.

FINANCIAL STATUS REPORT

INSTRUCTIONS FOR COMPLETION

SF 269 Long Form

The following instructions integrate the general instructions on the back of the long form for Financial Status Report completion with the source of information that is needed to complete certain items correctly. The completed form is due to the Office of Grants Management/ Bureau of Primary Health Care 90 days after the end of a Budget Period.

Item 1:

This item is: Health Resources and Services Administration, BPHC.

Item 2:

The grant number shown in item 4 on the final NGA for the budget period.

Item 3:

This information is in item 10 on the final NGA for the budget period.

Item 4:

Enter the employer identification number assigned by the U. S. Internal Revenue Service. This number can be found in item 18 of the final NGA for the budget period for which the FSR is being prepared. It should be the same number as that assigned to the Organization identified in Item 3 above.

Item 5:

This space is reserved for the account number or other identifying number assigned by the recipient for its own use. The information is not required (i.e., the grantee chooses whether or not to show a number).

Item 6:

Check **Yes** only if this is the last report for the period shown in item 8.

Item 7:

Grantees are expected to report program outlays and program income on an accrual basis.

Item 8:

This is the same period as that shown in item 6 on the final NGA of the budget period (i.e., the total period of grant support, referred to on the NGA as the **Project Period**).

Item 9:

Report for the budget period only. This is the same period as that shown in item 7 on the final NGA of the budget period.

Item 10:

Report financial results on the scope of the project for which the grant was made (i.e., the approved scope of project activities for the budget period). Report financial information on the budget period identified in Item 9 only. Cumulative reports will be returned for resubmission.

Report all amounts for Items 10.a through 10.t in column III. If this is a revised version of an earlier report for the same budget period, footnote each revised item attaching an explanation of the adjustments (i.e., all changes from the previous report) as instructed in Item 12 of the SF 269.

Item 10.a:

Enter total accrued program expenses. Include expenses paid with cash received as program income if that income will also be shown on lines 10.c, 10.g or 10.h. Do not include program income that will be shown on line 10.s. Expenses may exceed the amount of the total approved budget on the NGA, but must be limited to expenses for the approved scope of project.

Reported expenses should include expenses paid or accrued to be paid from Federal funds, fee, premiums, and third-party reimbursements; and, State, local and other operational funding including third-party in-kind contributions.

Some grantee resources and expenses, other than patient service revenue, may not be designated to be included in the approved scope of project and should be excluded. Some examples are:

Funds for capital acquisitions and improvements that are not a part of the approved project.

Grants from private foundations for activities that are outside the approved project.

Funds from general fund-raising efforts for activities not a part of the approved project or that the grantee does not choose to devote to the approved project.

Item 10.b:

Enter any receipts related to expenditures reported on the form that are being treated as a reduction of expenditure rather than income, and were not already netted out of the amount shown as outlays on line 10.a.

Item 10.c:

Refer to item 15 of the final NGA for the budget period for the alternative to be used for use of program income. If the letter B is in the box associated with this item, then the program income expended for the project is reported on this line of the report. The deduction alternative does not apply to Section 330 Consolidated Health Center Programs and is rarely used for BPHC awards. This item should always contain a zero for Section 330 programs.

Item 10.d:

Line 10.a less lines 10.b and c.

Item 10.e:

The value of third-party in-kind contributions applied to (i.e., received by or allocated to) the approved project during the budget period. This amount was also included in the total outlays reported on line 10.a.

Item 10.f:

There are no awards made by BPHC authorizing the use of Federal funds to meet matching or cost sharing requirements. This line should always be zero.

Item 10.g:

All program income accrued from fees, premiums, and third-party reimbursements (as defined in the instructions for Item 10.a), after adjustment for uncollectibles, which is needed for the approved project's actual costs of operations during the budget period. For Section 330 Consolidated Health Center Programs, the amount shown on line 10.g will exceed amount of premiums, and third-party reimbursements cited in Item 12.a (Estimated Program Income) of the last NGA for the budget period only when this income is needed for actual costs of the approved project.

Item 10.h:

The amount on this line always shows, and usually is the same amount as all State, local, and other operational funding received by or allocated to the approved project during the budget period. For Section 330 Consolidated Health Center Programs, the amount of Excess Program Income accumulated from prior budget periods, and used as part of the operational revenue of the approved project during the budget period being reported on, is also revenue to be reported on this line. Program income used in accordance with the additional costs alternative and reflected in total outlays should also be reflected on this line.

Because expenditure of more Federal funds than are awarded for use on the NGA is not authorized, line 10.n may not be greater than line 10.o. Line 10.h must be great enough to cover all outlays not reported on other lines as well as total unliquidated obligations even if it entails including an amount by which total net outlays and unliquidated obligations exceed total available resources. Therefore, the amount of additional revenue needed to cover any deficit or loss from operations is reported on this line.

Item 10.i:

The sum of lines 10.e, 10.g, and 10.h.

Item 10.j:

The difference between line 10.d and line 10.i.

Item 10.k:

Enter the total amount of unliquidated obligations. There should not be any unliquidated obligations for private non-profit organizations reporting revenues and expenses on an accrual basis using Generally Accepted Accounting Principles.

On the final report, line 10.j must always be zero.

Item 10.l:

For the reasons stated in Item 10.j above, this line should almost always be zero.

Item 10.m:

For the reasons stated in Item 10.j above, this line should almost always be zero.

Item 10.n:

The sum of line 10.j and line 10.m. This line must be equal to or less than line 10.o. If line 10.n should exceed line 10.o, then the excess must be added to line 10.h and lines 10.i and 10.j must be recomputed. See Item 10.h for an explanation.

Item 10.o:

This should be the amount shown in Item 12.a ii of the final NGA for the budget period. Reflecting an amount different than the amount authorized for expenditure shown in item 12.a ii of the NGA should **never be** done unless there is written authorization from the Office of Grants Management. If such is the case, then attach a copy of the authorization to your submission; and, footnote this line with an explanation in Item 12 of the report.

If any of the funds authorized for expenditure were restricted, footnote this line and attach an explanation in Item 12 that identifies the amount(s) and purpose(s) for which the funds were restricted.

Item 10.p:

Line 10.o minus line 10.n.

If any of the unobligated balance of Federal funds is ~~A~~restricted@ funds, footnote the item and include an explanation in Item 12 that identifies the amount(s) and purpose(s) for which the funds are restricted. Provide additional pages of explanation as necessary.

Item 10.q:

Total of lines 10.c and/or g.

Item 10.r:

Section 330 Consolidated Health Center programs should always put a zero in this line because these programs do not use program income in accordance with the addition alternative.

Refer to item 15 of the NGA for the alternative used for use of program income. If the letter A is in the box associated with this item, then the program income used in the project is reported on this line of the report.

Item 10.s:

For Section 330 Consolidated Health Center programs, the amount of excess program income is reported here.

Item 10.t:

For Section 330 Consolidated Health Center Programs, this is the total accrued income from fees, premiums, and third-party reimbursements (as defined in the instructions for Item 10.a), after adjustments for uncollectibles, earned by the approved project during the budget period. It is expected that this amount will be approximately the same amount as estimated in the application and reflected in item 12ii a (Estimated Program Income) on the final NGA for the budget period. Explain the differences in item 12 if the difference is more than 10 percent.

Item 11.

This item **is only applicable to** those organizations that have established an indirect cost rate with the Federal Government. Indirect cost rates are only established if an organization is funded by more than one Federal agency. If there are indirect costs that are allocable between those agencies=programs, establishment of an indirect cost rate with the Federal Government is one method of making these cost allocations. There are a very few private non-profit organizations funded by the Bureau of Primary Health Care that would be required to establish an approved indirect cost rate.

Item 11.a, b, c, d, & e:

If only one type of rate was in effect during the budget period, place an x in the appropriate box to report the type of rate. If more than one type of rate was in effect during the budget period, footnote the issue in item 12. Attach a schedule showing the basis against which the different rates were applied, the respective rates, the types of rates, the calendar periods the rates were in effect, amount of indirect expense charged to the project, and the Federal share of indirect expense charged to the project during the budget period.

Item 12:

Use this item for footnotes and other explanatory information as necessary and as discussed in the instructions above. Additional sheets of explanation may be attached as necessary.

Item 13:

An official of the grantee organization authorized to sign legal documents for the organization must sign the FSR on line 13. For an FSR to be accepted, the Grants Management Officer in the Bureau of Primary Health Care must receive an FSR with an original signature.

PAYMENT MANAGEMENT SYSTEM DRAWDOWN RESTRICTION

- The NGA will state, as a special condition/special remark, that funds are restricted and the draw down of Federal funds requires prior approval from the Grants Management Officer. The Payment Management System is notified that automatic disbursements to the grantee should not be allowed,
- This restriction may be on all funds of a grantee organization or may be for a specific grant(s) only,
- Drawdowns are usually limited to a prorated amount based on the length of the budget period to ensure that Federal funds are available throughout the entire budget period,
- The grantee must submit an original signed SF 270 for each monthly drawdown to the awarding agency's Office of Grants Management. **One form is provided to the grantee by the Office of Grants Management at the time the restriction is placed on the NGA and the grantee is responsible for making additional copies as needed.** To ensure timely processing and authorization of funds by the Payment Management System, the request should be submitted approximately 10 working days prior to needing the funds,
- The Grants Management Specialist in the Office of Grants Management will review the request for compliance based on the total Federal amount authorized for the budget period, obtain final approval from the Grants Management Officer, and forward the approved request to the Payment Management System. Generally this is done within one working day with the Payment Management System receiving the request sometime the next working day,
- The Payment Management System will authorize transfer of the funds on the date needed (generally the first day of a given month) or as soon as possible thereafter,

- Restrictions remain as long as an organization is designated an exceptional or until the Federal agency no longer has financial concerns,

- A restriction on drawdowns may be imposed in the following situations:

A grantee is designated as an Aexceptional@organization

A grantee is experiencing financial difficulties

A grantee fails to submit required reports such as Financial Status Reports or annual audits

A grantee fails to submit quarterly expenditure reports to the Payment Management System (SF272)

PROGRAM INCOME

Definition: Program income, per 45 CFR Parts 74 and 92, is gross income earned by the recipient that is directly generated by a supported activity or earned as a result of the award.

For purposes of the Health Centers program (Community Health, Migrant Health, Community/Migrant Health, Public Housing, Health Care for the Homeless, and Healthy Schools/Healthy Communities), BPHC only wants the amount of income earned from patient services (fees for service, premiums and third party reimbursements including health plans and/or Medicare/Medicaid reimbursements).

- Most program guidances ask grantees to submit a **total** budget application for the **scope of the project** even though NOT in all instances will the non-federal share be reflected on the NGA e.g. Primary Care Associations, Primary Care Offices,
- Program income needs to be consistently reported throughout the application (face page, 424A, and when applicable (grantees using the Single Grant Application guidance) the BPHC Funding Summary, and Income Analysis Form,
- The estimated program income will be reflected on the NGA only for the Health Centers program,
- The NGA will specify the option that must be used to disburse program income. It will usually be additional, except in those instances where there is a matching requirement, or the Health Centers program whose grants have a special remark and are noted Aother,@
- Because the law for Health Centers requires that Federal funds only be awarded for the difference between total costs and all other sources of funds, it is expected that most program income will be expensed during the budget period in which it is received. For other programs this may also be the case, but it is allowable to accumulate income to carry on the goals and objectives of the project after Federal funding has ceased,
- If estimated program income is reflected in the total budget on the NGA, the actual amount must be reported on the FSR.

SUBMITTING POST AWARD COMMUNICATIONS

Definition: Post-award communication is any written document submitted to the awarding agency after the NGA for a specific budget period has been issued.

- All post-award requests and communications should be sent to the BPHC **grants management representative** indicated in the "contact" section of the NGA. Failure to follow this guidance will delay a response.
- In many instances it is helpful and we encourage you to discuss your communication with the appropriate grants management and/or program representative indicated in the "contact" section of the NGA prior to submission. To expedite your request it is recommended that you submit a courtesy copy to the program representative,
- A post-award request/communication is one that relates to the terms (general or specific) on the NGA including:
 1. any change in the terms and conditions of the NGA,
 2. responses to special conditions, special remarks, or reporting requirements on the NGA,
 3. all prior approval requests, and
 4. general information that affects the NGA,
- Every communication should include:
 1. The grant number (item 4 on the NGA),
 2. The reason for the communication:
 - (A) responding to a condition,

(B) requesting prior approval, or

(C) providing information of general interest e.g. changes that have been made that do not require prior approval but are important for the Federal agency to know,

3. The substantive information:

(A) condition response,

(B) the narrative justification and explanation for the specific prior approval request, or

(C) the general information being communicated,

(D) the name and number of a person to contact if further information is needed,

4. The original signature of an authorized official of the grantee organization,

- Other information that is required for a particular type of request is highlighted under that specific request.

ACTIONS REQUIRING PRIOR APPROVAL

The following is a list of postaward actions, which require Federal agency prior approval. You must consult Chapter 8 of the PHS Grants Policy Statement and other BPHC documents for specific details applicable to each action. All prior approval requests **must be submitted from and be signed by the grantee organization.** Since the NGA, specific program legislation or regulations may require other prior approvals, this list may not be all-inclusive:

1. Additional Funds (administrative supplements)
2. Alterations and Renovations
3. Audiovisual Materials.
4. Capital Expenditures.
5. Carryover of Unobligated Funds from One Budget Period to Another Within an Approved Project Period.
6. Consumer/Provider Board Participation.
7. Contracting/Transferring Substantive Work
8. Equipment Costing over \$25,000.
9. Extensions of the Budget/Project Period With or Without Additional Funds.
10. Grantee Organization Change
11. Indemnification Against Third Parties.
12. Matching, Waiver of Requirement

13. Name Change of Grantee Organization
14. Patient Care Costs.
15. Preaward Costs Incurred More than 90 Days Prior to the Effective Date of any New or Competing Continuation Award.
16. Program/Project Director/Principal Investigator Change (only when specifically noted on the NGA)
17. Program Income.
18. Publications and Printing.
19. Rebudgeting
20. Restrictions on the Notice of Grant Award.
21. Retroactive Prior Approval
22. Scope, Change of
23. Successor In Interest
24. Transfer of Funds Between Construction and Nonconstruction.

ADDITIONAL FUNDS

(Administrative Supplements ONLY)

Definition: The award of additional funds based on an administrative decision of the Federal agency rather than the recommendation of an objective (competitive) review to:

(1) support new or additional activities which are not identified in the current grant or which significantly expand the project's scope beyond the purposes(s) for which the current grant was awarded;

(2) support an expansion of the grant approved activities; or

(3) provide for an increase in costs due to unforeseen circumstances.

- An administrative supplement can be requested by the grantee or be recognized as a need by the Federal funding agency,
- Contact the program representative indicated in the "contact" section of the NGA for advice before submitting this type of request. This person will assist in being sure the request is appropriate and complete,
- Submit the request to the BPHC grants management representative indicated in the "contact" section of the NGA. The request should be submitted as soon as you are aware of the need and/or availability of additional funds. Allow a minimum of 30 days for a response,
- The request can be a letter, the 5161-1 application, or another form designated by the awarding agency. The request must have the original signature of an authorized official of the grantee organization,
- The request should include:
 - (1) the grant number (item 4 on the NGA),
 - (2) the amount of funds needed,

- (3) the staff person with whom the request was discussed,
 - (4) a statement/justification for the funds,
 - (5) the result if the request is not approved,
 - (6) a detailed categorical budget and narrative explanation (we suggest using the 5161-1 application budget pages (424A) to facilitate providing this information),
 - (7) a statement whether any future commitments of Federal funds are anticipated,
 - (8) the current status of unobligated funds, and
 - (9) a statement whether commitments and/or expenditures have already occurred,
- Final approval is always in the form of an NGA signed by the BPHC Grants Management Officer.

CARRYOVER OF UNOBLIGATED BALANCES

Definition: Carryover is the authorizing of unobligated balances of Federal funds from a previous budget period to cover allowable costs in a current budget period.

- Contact the program or grants management representative indicated in the "contact" section of the NGA for advice before submitting this type of request. This person will assist in being sure the request is appropriate and complete. There is no such thing as an automatic carryover. Regardless of the reason for the unobligated balance, written prior approval must be requested and received (revised NGA). As permission to use unobligated balances is a preaward decision, denial is not an appealable decision.
- Submit the request to the grants management representative indicated in the "contact" section of the NGA. Allow a minimum of 30 days for a response. The request must have the original signature of an authorized official of the grantee organization,
- The request should be submitted **after or simultaneously with the submission of the FSR** but prior to expenditure/obligation of the funds (submission of a request prior to submission of the FSR is generally going to be a waste of time and energy as the actual balance is not known and nothing will be done until the FSR is received except as indicated). In certain circumstances (generally when funds have been awarded very late in a budget period for a specific purpose or when funds have been awarded to support costs beyond the current budget period) consideration will be given to waiving the requirement for prior submission of the FSR,
- The request should be in letter form and include:
 - (1) the grant number (item 4 on the NGA),
 - (2) an explanation of why the funds are unobligated,
 - (3) the purpose for which the funds are needed in the current budget period,

- (4) a statement that the request will not result in recurring costs that cannot be covered by the grantee or be used for costs that are already covered by current funding, and
 - (5) a categorical budget for the amount of the unobligated balance and, any "matching" funds that are required, if applicable (we suggest using the 5161-1 application budget forms (424A) to facilitate providing this information),
- Approval will always be reflected on an NGA signed by the BPHC Grants Management Officer.

CONTRACTING/TRANSFER OF SUBSTANTIVE PROGRAMMATIC WORK

Definition: Substantive programmatic work is the primary activities for which grant support is provided and/or a significant portion of the activities to be conducted but does not include supplies, material, equipment or general support services.

- Contact the program representative indicated in the "contact" section of the NGA for advice before submitting this type of request. This person will assist in being sure the request is appropriate and complete,
- Submit the request to the grants management representative indicated in the "contact" section of the NGA. Allow a minimum of 30 days for a response. The request must have the original signature of an authorized official of the grantee organization,
- The request should be made prior to the transfer of the work to a third party,
- When transfer of a substantive portion of the programmatic work is proposed, the funding agency will question whether the grantee of record is appropriate,
- The request should include:
 - (1) the grant number (item 4 on the NGA),
 - (2) a description of the activities to be transferred,
 - (3) the party to whom the activities will be transferred,
 - (4) the reason for such a transfer (why can't/shouldn't the grantee perform the activities?),

- (5) a breakdown of and justification for the estimated costs, including the manner in which indirect costs, if any, will be reimbursed, and a statement that all costs are reasonable and commensurate with the work to be performed (we suggest using the 5161-1 application budget pages (424A) to facilitate providing this information),
 - (6) the type of contract expected to be awarded, and
 - (7) the kinds of organizations or other parties solicited, and the method of selection,
- Approval will be reflected in a letter signed by the BPHC Grants Management Officer (unless a rebudgeting is involved, in which case an NGA signed by the BPHC Grants Management Officer will be done).

REQUEST FOR AN EXTENSION OF THE PROJECT PERIOD END DATE

Definition: A request for an extension of the project to complete goals and objectives and bring the grant to an orderly conclusion when continued Federal support is not expected.

- The Office of Grants Management will generally authorize a maximum of 12 months,
- Contact the program representative indicated in the "contact" section of the NGA for advice before submitting this type of request. This person will assist in being sure the request is appropriate and complete,
- Submit the request to the grants management representative indicated in the "contact" section of the NGA at least 60 days prior to the expiration of the project period. The request must have the original signature of an authorized official of the grantee organization,
- The request should include:
 - (1) the grant number (item 4 on the NGA),
 - (2) the additional time desired (1-12 months),
 - (3) the grant project goals and objectives to be completed, and
 - (4) the Federal funds available to complete the goals and objectives,
- Approval will always be reflected on a revised NGA signed by the BPHC Grants Management Officer.

GRANTEE ORGANIZATION CHANGE

Definition: The transfer of the legal and administrative responsibility for administering a grant-supported project or activity from one legal entity to another before the expiration date of the approved project period (often confused with a successor-in-interest).

- Since this is a very involved process, it is important to contact the program representative indicated in the "contact" section of the NGA for advice and assistance as soon as this type of request is anticipated and work closely with them during the entire process. This action cannot take place without prior approval of the Federal agency,
- Submit the request to the grants management representative indicated in the "contact" section of the NGA. Allow at least 30 days for a response. The request must have the original signature of an authorized official of the grantee organization,
- The request should include:
 - (1) the grant number (item 4 on the NGA),
 - (2) the effective date of the proposed transfer,
 - (3) the reason for the proposed transfer,
 - (4) a relinquishing statement from the current grantee,
 - (5) an estimate of the unobligated balance available for transfer to the new grantee (a preliminary FSR is acceptable),
 - (6) the proposed disposition of equipment purchased under the grant project,

- (7) a statement that the original need still exists, there is no significant change or reduction in the scope or objectives of the project, and there is no diminution of services to any group that received services or benefits under the original NGA,
 - (8) the name of the proposed new grantee organization and their agreement to accept the grant, and
 - (9) an application, including a categorical budget and narrative justification, from the proposed new grantee organization (use the 5161-1 application forms to facilitate providing this information),
- Approval will always be reflected on revised NGAs signed by the BPHC Grants Management Officer (one to deobligate funds from the current grantee and one to obligate funds to the new grantee).

MATCHING REQUIREMENT WAIVERS

Definition: Matching is the value of allowable third party in-kind contributions and the allowable costs of a federally assisted project or program not borne by the Federal Government.

- This item refers only to the "matching" that is **legislatively required** of a grantee. The following programs currently have legislative "matching" requirements:
 - Native Hawaiian Health Care Systems
 - State Loan Repayment
 - State Offices of Rural Health
- Contact the grants management specialist and/or program representative indicated in the "contact" section of the NGA for advice and assistance prior to submission of this type of request. This person will assist in being sure the request is appropriate and complete,
- When the law permits a waiver, submit the request to the grants management representative indicated in the "contact" section of the NGA. Allow at least 30 days for a response. The request must have the original signature of an authorized official of the grantee organization,
- The request should include:
 - (1) the grant number (item 4 on the NGA),
 - (2) the amount of matching that can be met,
 - (3) a justification/explanation of why the required "matching" cannot be met--what attempts have been made and from whom to obtain non-Federal resources, and
 - (4) the other concurrences required by the law, etc., if any,
- Approval will be reflected in a letter signed by the BPHC Grants Management Officer (unless some other action requires an NGA).

NAME CHANGE NOTIFICATION

Definition: The rights and obligations of the grantee are not affected just the name has been legally changed.

- Although this does not require prior approval, we do need notification so changes can be made in our record systems,
- Submit the notification to the BPHC grants management representative indicated in the "contact" section of the NGA. The notification must have the original signature of an authorized official of the grantee organization,
- The request should include:
 - (1) the grant number (item 4 on the NGA),
 - (2) a copy of the instrument which effected the name change, authenticated by an appropriate official of the State having jurisdiction,
 - (3) a list of all BPHC grants awarded, accompanied by a new application face page for each showing the new name and new principal officer(s), if any change occurred,
- Approval will be reflected on an NGA signed by the BPHC Grants Management Officer.

CHANGE, ABSENCE OF PROJECT DIRECTOR, PROGRAM DIRECTOR, OR PRINCIPAL INVESTIGATOR

Definition: The appointment of a new Project Director (PD), Program Director (PD), Principal Investigator (PI) or the absence for three months or more, or a 25 percent reduction in the time devoted to the project by said individual.

- The PI, PD is the individual designated by the grantee to direct the project or program being supported and is named on the NGA in item 11. He/she must be responsible and accountable to officials of the grantee organization for the proper conduct of the project,
- Other key personnel are often the Chief Executive Officer, Medical Director or Chief Financial Officer for service delivery programs. Prior approval is needed only for PIs on research grants (except State and local governments) or when it is a special condition or special remark on the NGA. The Public Health Service Grants Policy Statement authorizes the waiver of the prior approval requirement for other types of grant programs and for State and local governments. However, it is important for an organization to keep us advised of such changes and provide updated resumes, etc. for this person as well as other key personnel,
- If prior approval is required and the qualifications of any proposed replacement are not acceptable to the awarding agency, the grant may be terminated,
- Submit the request or notification to the grants management representative indicated in the "contact" section of the NGA. Allow at least 30 days for a response. The request or notification must have the original signature of an authorized official of the grantee organization,

- The request should include:
 - (1) the grant number (item 4 on the NGA),
 - (2) the action being taken and why--change, absence, reduction of time,
 - (3) the effective date of the action, and
 - (4) the name and resume of the proposed PI/PD, if applicable,
- Notification of a change of PI/PD will be reflected on a revised NGA signed by the BPHC Grants Management Officer. Prior approval of the absence or reduction of time of a PI/PD or other key personnel will be a letter.

REBUDGETING

Definition: The moving of funds from one categorical line item to another.

- 45 CFR Parts 74 and 92 and the Public Health Service Grants Policy Statement allow a grantee a certain amount of discretion to take such actions without awarding agency prior approval to accomplish the goals and objectives of the grant,
- It is always incumbent upon the grantee to ensure that they exercise proper stewardship over Federal funds and that all costs charged to an award are allowable, allocable, and necessary,
- A grantee must consult the applicable law, regulations, cost principles, NGA and the Public Health Service Grants Policy Statement before doing any rebudgeting to verify what does and does not require prior approval,
- The request should be submitted to the grants management representative indicated in the contact section of the NGA. Allow at least 30 days for a response. The request must have the original signature of an authorized office of the grantee organization,
- The request should include:
 - (1) the grant number (item 4 on the NGA),
 - (2) the part of the Public Health Service Grants Policy Statement which requires awarding agency prior approval,
 - (3) the rebudgeting that is to be done (categorical line items being reduced and increased),

- (4) the reason for the rebudgeting including a narrative explanation and justification for the action and how it will impact the overall activities of the grant, and why the funds are available in one category and needed in another, and
 - (5) a categorical budget (use the 5161-1 application budget pages (424A) to facilitate this action)
- Approval will be reflected in a letter signed by the BPHC Grants Management Officer.

REMOVAL OF SPECIAL CONDITIONS

Definition: Special conditions are additional terms applicable to a particular NGA.

- It is important to pay close attention to this item since failure to meet the requirements could result in a restriction being placed on the authority to draw down funds from the Payment Management System, disallowance of an expenditure, or suspension and/or termination of grant support,
- Contact the program and/or the grants management representative indicated in the "contact" section of the NGA for advice before submitting this type of request. This person will assist in being sure the request is appropriate and complete,
- Submit the request to the grants management representative indicated in the "contact" section of the NGA and allow a minimum of 30 days for a response. The request must have the original signature of an authorized official of the grantee organization,
- The response to a special condition should be submitted (postmarked) by the due date indicated on the NGA unless an extension has been approved, in writing (a FAX or e-mail is acceptable), by the program or grants management contact,
- The response should include:
 - (1) the grant number (item 4 on the NGA),
 - (2) the information required in the special condition,
- Approval/removal of the special condition(s) will be reflected in a letter signed by the BPHC Grants Management Officer (unless there is some other reason for revising the NGA)

RETROACTIVE APPROVAL

Definition: Obtaining approval for an action after the action has been taken.

- Contact the program staff representative indicated in the "contact" section of the NGA for advice and assistance prior to submission of such a request. This person will assist in being sure the request is appropriate and complete,
- The request should be submitted to the grants management representative indicated in the "contact" section of the NGA. Allow at least 30 days for a response. The request must have the original signature of an authorized official of the grantee organization,
- The request should include:
 - (1) the grant number (item 4 on the NGA),
 - (2) the information that should have been included had the action been requested in a timely manner (e.g. action taken, justification for the action including the Public Health Service Grants Policy Statement part which requires awarding agency prior approval, categorical budget, etc.),
 - (3) an explanation of why prior approval was not requested,
 - (4) a description of what action has been taken to ensure that requests are made in a timely manner in the future, and
 - (5) a description of the impact on the overall activities of the project if retroactive prior approval is not given,
- Approval will be reflected in a letter signed by the BPHC Grants Management Officer (unless some other action requires an NGA).

SUCCESSOR- IN -INTEREST

Definition: A change in the legal status of a grantee institution as a result of legislative or some other action such as a merger, divestiture or other corporate change.

- The new organization must meet the grant program's eligibility requirements in order to be recognized,
- Contact the program representative indicated in the "contact" section of the NGA for advice and assistance prior to submission of such a request. This person will assist in being sure the request is appropriate and complete,
- The request must be sent to the grants management representative indicated in the "contact" section of the NGA. Allow at least 30 days for a response. The request must have the original signature of an authorized official of the grantee organization,
- The notification must include:
 - (1) the grant number (item 4 on the NGA),
 - (2) a properly authenticated copy of the instrument by which the transfer of assets will be effected,
 - (3) a certified copy of the resolution of the Board of Trustees of the grantee organization authorizing the merger, etc.,
 - (4) a properly authenticated copy of the Certificate and Articles of Incorporation of the transferee if such corporation was formed for the purpose of receiving the assets involved in the performance of the Federal grant(s),
 - (5) an opinion of counsel for the transferor and the transferee that the transfer was properly effected,

- (6) a list of all Federal grants affected which includes the grant numbers and titles of the projects, and
 - (7) an application face page for each grant affected (5161-1, 424),
- Approval will be reflected in the issuance of an NGA signed by the BPHC Grants Management Officer for each grant affected.

APPENDIX

BPHC OFFICE OF GRANTS MANAGEMENT "HELPFUL HINTS" ACRONYMS

BCRR -	BUREAU COMMON REPORTING REQUIREMENTS (now UDS)
BPHC -	BUREAU OF PRIMARY HEALTH CARE
CFDA -	CATALOG OF FEDERAL DOMESTIC ASSISTANCE
CFR -	CODE OF FEDERAL REGULATIONS
CO -	CENTRAL OFFICE (SAME AS HEADQUARTERS)
CRS -	CENTRAL REGISTRY SYSTEM
DHHS -	DEPARTMENT OF HEALTH AND HUMAN SERVICES
EIN -	EMPLOYEE IDENTIFICATION NUMBER
EPI -	ESTIMATED PROGRAM INCOME
FO -	FIELD OFFICE (PREVIOUSLY REFERRED TO AS REGIONAL OFFICE)
FSR -	FINANCIAL STATUS REPORT
FY -	FISCAL YEAR
GMO -	GRANTS MANAGEMENT OFFICER
GMS -	GRANTS MANAGEMENT SPECIALIST
GPO -	GOVERNMENT PRINTING OFFICE

GPS	-	GRANTS POLICY STATEMENT
HRSA	-	HEALTH RESOURCES AND SERVICES ADMINISTRATION
MAI	-	MANAGEMENT ASSESSMENT ITEM
NGA	-	NOTICE OF GRANT AWARD
OA	-	OFFICE OF THE ADMINISTRATOR, HRSA
OAT	-	OFFICE FOR THE ADVANCEMENT OF TELEHEALTH
OGM	-	OFFICE OF GRANTS MANAGEMENT
ORHP	-	OFFICE OF RURAL HEALTH POLICY
PCA	-	PRIMARY CARE ASSOCIATION
PD	-	PROJECT DIRECTOR/PROGRAM DIRECTOR
PHS	-	PUBLIC HEALTH SERVICE
PI	-	PRINCIPAL INVESTIGATOR
PMS	-	PAYMENT MANAGEMENT SYSTEM
PO	-	PROJECT OFFICER/PROGRAM OFFICER
UDS	-	UNIFORM DATA SYSTEM (previously BCRR)
UOB	-	UNOBLIGATED BALANCE
424	-	FACE PAGE OF THE 5161-1 GRANT APPLICATION FORM
424A	-	BUDGET PAGES OF THE 5161-1 GRANT APPLICATION FORM
5161-1	-	APPLICATION FORM USED TO APPLY FOR GRANT FUNDS

Major Grant Programs

Program	Title	CFDA	Authority
H09	PACIFIC BASIN	93.163	SECTION 301, PHS ACT, AS AMENDED
H19	COMMUNITY/MIGRANT HEALTH PROGRAM	93.224 & 93.246	SECTION 330(e)&(g), PHS ACT, AS AMENDED
H1B	PUBLIC HOUSING	93.927	SECTION 330(i), PHS ACT, AS AMENDED
HIC	NATIVE HAWAIIAN	93.932	PUBLIC LAW 100-579
H20	MIGRANT HEALTH	93.246	SECTION 330(g), PHS ACT, AS AMENDED
H22	INTEGRATED SYSTEMS	93.224A	SECTION 330(e), PHS ACT, AS AMENDED
H27	COMMUNITY HEALTH	93.224	SECTION 330(e), PHS ACT, AS AMENDED
H2B	HANSENS DIS AMBU CARE	93.215	SECTION 320(A)(2) OF THE PHS ACT
H2D	HEALTHY SCHOOLS/HEALTHY COMMUNITIES	93.151	SECTION 330(h), PHS ACT, AS AMENDED
H31 & H32	TECH & NON-FIN. ASSIST (NAT)	93.129	SECTION 330(k), PHS ACT, AS AMENDED
H37	BLACK LUNG	93.965	BENEFITS REFORM ACT OF 1977, PL 95-239
H38	NHSC SEARCH	93.130	SECTION 333(D), PHS ACT, AS AMENDED
H56	STATE LOAN REPAYMENT	93.165	SECTION 338(I), PHS ACT, AS AMENDED
H66	HOMELESS	93.151	SECTION 330(h), PHS ACT, AS AMENDED
H68	PRIMARY CARE ASSOCIATIONS	93.129	SECTION 330(k), PHS ACT, AS AMENDED
U30	CENTRAL OFFICE/COOP	93.129	SECTION 330(k), PHS ACT, AS AMENDED

Program	Title	CFDA	Authority
U31	CENTRAL OFFICE/COOP/MH	93.129	SECTION 330(k), PHS ACT, AS AMENDED
U68	PRIMARY CARE OFFICES	93.130	SECTION 333(D), PHS ACT, AS AMENDED
D03	RURAL HEALTH OUTREACH	93.912	SECTION 330(A), PHS ACT, AS AMENDED
D04	RURAL HEALTH OUTREACH	93.912	SECTION 330(A), PHS ACT, AS AMENDED
D06	RURAL HEALTH NETWORKS	93.912A	SECTION 330(A), PHS ACT, AS AMENDED
H54	STATE RURAL HOSPITAL FLEXIBILITY PROGRAM	93.241	
H95	STATE OFFICES OF RURAL HEALTH	93.913	SECTION 338(J), PHS ACT, AS AMENDED
U1C	RURAL RESEARCH	93.155	PHS ACT, TITLE III, P.L. 102- 170
U27	RURAL HEALTH OUTREACH CO- OPERATIVE AGREEMENTS	93.912A	SECTION 330(A), PHS ACT, AS AMENDED
H2A	RURAL TELEMEDICINE	93.211	SECTION 330(A), PHS ACT, AS AMENDED
U26	TECH & NON FIN ASSIST FOR TELEMEDICINE	93.211	SECTION 330(A), PHS ACT, AS AMENDED

Helpful Internet Sites

This list was verified as of July 2000. Its accuracy beyond this date is not assured. We hope these sites prove helpful.

BPHC Home Page

<http://www.bphc.hrsa.gov>

BPHC Office of Grants Management *(includes links to Health Center Program Expectations, SPOC List, PHS Grants Policy Statement, Payment Management System information, FSR form, HHS GrantsNet, HRSA Preview, PINS, PALS (BPHC ACCESS))*

<http://www.bphc.hrsa.gov/grants/>

Catalogue of Federal Domestic Assistance (CFDA)

<http://www.cfda.gov>

Code of Federal Regulations

<http://www.access.gpo.gov/nara/cfr>

Federal Register

http://www.access.gpo.gov/su_docs/aces/aces140.html

(you will have to scan down to Government Information Data and then select Federal Register)

Financial Status Reports

<http://www.fhwa.dot.gov/aaa/forms2.htm>

<http://www.fhwa.dot.gov/aaa/sf269.pdf> (This gives you the actual long form)

GrantsNet

<http://www.hhs.gov/grantsnet>

Grants Policy Statement/PHS

See BPHC OGM Site above

HHS Home Page

<http://www.hhs.gov>

HRSA Home Page

<http://www.hrsa.gov>

HRSA Preview (Agency Funding Opportunities)

<http://www.hrsa.gov/grant.htm>

HRSA Grant Application Center

e-mail address: hrsagac@hrsa.gov

OMB Circulars - Grants Management

<http://www.doleta.gov/regs/omb>

Office of Rural Health Policy

<http://www.nal.usda.gov/orhp/>

45 CFR Parts 16, 74, 75, 76, 92, 96, & 100

<http://www.hhs.gov/progorg/grantsnet/adminis/cfr45.html>

Payment Management System

<http://www.dpm.psc.gov/>

e-mail address: info@psc.hhs.gov

Single Point of Contact (SPOC) List

<http://www.hhs.gov/progorg/grantsnet/laws-reg/spoq0695.htm>